

## APPLICATION DATA SHEET

### APPLICATION INFORMATION

Application Date::	01/11/02
Application Type::	REGULAR
Subject Matter::	UTILITY
CD-ROM or CD-R?::	NONE
Title::	w-CARBOXYARYL SUBSTITUTED DIPHENYL UREAS AS RAF KINASE INHIBITORS
Attorney Docket Number::	BAYER 25A

### INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	Germany
Status::	FULL CAPACITY
Given Name::	Bernd
Family Name::	RIEDL
City of Residence::	Wuppertal
Country of Residence::	Germany
Street of Mailing Address::	Von der Goltz Strasse 7
City of Mailing Address::	Wuppertal
Country of Mailing Address::	Germany
Postal or Zip Code of Mailing Address::	42329

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	France
Status::	FULL CAPACITY
Given Name::	Jacques
Family Name::	DUMAS
City of Residence::	Orange
State or Province of Residence::	Connecticut
Street of Mailing Address::	821 Beechwood Road
City of Mailing Address::	Orange
State or Province of Mailing Address::	Connecticut
Postal or Zip Code of Mailing Address::	06477

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	India
Status::	FULL CAPACITY
Given Name::	Uday
Family Name::	KHIRE

City of Residence:: Hamden  
State or Province of Residence:: Connecticut  
Street of Mailing Address:: 101 Tangelwood Drive  
City of Mailing Address:: Hamden  
State or Province of Mailing Address:: Connecticut  
Postal or Zip Code of Mailing Address:: 06518

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: Canada  
Status:: FULL CAPACITY  
Given Name:: Timothy  
Middle Name:: B.  
Family Name:: LOWINGER  
City of Residence:: Nishinomiya City  
State or Province of Residence:: Hyogo  
Country of Residence:: Japan  
Street of Mailing Address:: #203, 5-7 Chitose-Cho  
City of Mailing Address:: Nishinomiya City  
State or Province of Mailing Address:: Hyogo  
Country of Mailing Address:: Japan  
Postal or Zip Code of Mailing Address:: 662-0046

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: William  
Middle Name:: J.  
Family Name:: SCOTT  
City of Residence:: Guilford  
State or Province of Residence:: Connecticut  
Street of Mailing Address:: 210 Saddle Hill Drive  
City of Mailing Address:: Guilford  
State or Province of Mailing Address:: Connecticut  
Postal or Zip Code of Mailing Address:: 06437

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: CANADA  
Status:: FULL CAPACITY  
Given Name:: Roger  
Middle Name:: A.  
Family Name:: SMITH  
City of Residence:: Madison  
State or Province of Residence:: Connecticut  
Street of Mailing Address:: 65 Winterhill Road

City of Mailing Address:: Madison  
State or Province of Mailing Address:: Connecticut  
Postal or Zip Code of Mailing Address:: 06443  
  
Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Jill  
Middle Name:: E.  
Family Name:: WOOD  
City of Residence:: Hamden  
State or Province of Residence:: Connecticut  
Street of Mailing Address:: 72 Pickwick Road  
City of Mailing Address:: Hamden  
State or Province of Mailing Address:: Connecticut  
Postal or Zip Code of Mailing Address:: 06517

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Mary-Katherine  
Family Name:: MONAHAN  
City of Residence:: Hamden  
State or Province of Residence:: Connecticut  
Street of Mailing Address:: 134 Park Avenue  
City of Mailing Address:: Hamden  
State or Province of Mailing Address:: Connecticut  
Postal or Zip Code of Mailing Address:: 06517

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY  
Given Name:: Reina  
Family Name:: NATERO  
City of Residence:: Hamden  
State or Province of Residence:: Connecticut  
Street of Mailing Address:: 113 Edgecomb Street  
City of Mailing Address:: Hamden  
State or Province of Mailing Address:: Connecticut  
Postal or Zip Code of Mailing Address:: 06518

Applicant Authority Type:: INVENTOR  
Primary Citizenship Country:: United States  
Status:: FULL CAPACITY

Given Name:: Joel  
 Family Name:: RENICK  
 City of Residence:: Milford  
 State or Province of Residence:: Connecticut  
 Street of Mailing Address:: 11 Wall Street, #4  
 City of Mailing Address:: Milford  
 State or Province of Mailing Address:: Connecticut  
 Postal or Zip Code of Mailing Address:: 06460  
  
 Applicant Authority Type:: INVENTOR  
 Primary Citizenship Country:: United States  
 Status:: FULL CAPACITY  
 Given Name:: Robert  
 Middle Name:: N.  
 Family Name:: SIBLEY  
 City of Residence:: North Haven  
 State or Province of Residence:: Connecticut  
 Street of Mailing Address:: 1187 Mt. Carmel Avenue  
 City of Mailing Address:: North Haven  
 State or Province of Mailing Address:: Connecticut  
 Postal or Zip Code of Mailing Address:: 06473

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	UNASSIGNED	01/12/01

#### ASSIGNMENT INFORMATION

Assignee Name:: BAYER CORPORATION  
 Street of Mailing Address:: 100 Bayer Road  
 City of Mailing Address:: Pittsburgh  
 State or Province of Mailing Address:: Pennsylvania  
 Postal or Zip Code of Mailing Address:: 15205